

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

FRIENDS OF KEVAN ABRAHAMS

ADDRESS (number and street)

1044 NORTHERN BOULEVARD

STE 305

ROSLYN

NY

11576

☐ Check if different  
than previously  
reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

C C00555292

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

NY

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:☒

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M / D D / Y Y Y Y  
11 / 04 / 2014in the  
State of

NY

(c) 30-Day **POST**-Election Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
04 / 01 / 2014

through

M M / D D / Y Y Y Y  
06 / 04 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer JEFFREY GUILLOT

Signature of Treasurer JEFFREY GUILLOT

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
06 / 12 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 31

Write or Type Committee Name

**FRIENDS OF KEVAN ABRAHAMS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	47366.00	109706.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	47366.00	109706.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	97874.24	31276.04
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	97874.24	31276.04
8. Cash on Hand at Close of Reporting Period (from Line 27).....	49996.76	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 31

Write or Type Committee Name

**FRIENDS OF KEVAN ABRAHAM**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
04 / 01 / 2014

To:

M M / D D / Y Y Y Y  
06 / 04 / 2014

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

36360.00

91647.00

**(ii) Unitemized.....**

9756.00

13459.00

**(iii) TOTAL of contributions from individuals ▶**

46116.00

105106.00

**(b) Political Party Committees.....**

0.00

250.00

**(c) Other Political Committees (such as PACs).....**

1250.00

4350.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

47366.00

109706.00

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

620.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

4600.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

51966.00

110326.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 31

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	97874.24	31276.04
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	12038.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	109912.24	31276.04

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	107943.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	51966.00
25. SUBTOTAL (add Line 23 and Line 24).....	159909.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	109912.24
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	49996.76

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

FRIENDS OF KEVAN ABRAHAMS

Full Name (Last, First, Middle Initial)

SEAN ACOSTA

Mailing Address 3515 S OCEAN BLVD.

City

HIGHLAND BEACH

State

FL

Zip Code

33487

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5013

Amount of Each Receipt this Period

550.00

ACTBLUE

Full Name (Last, First, Middle Initial)

IMRAN AHMED

Mailing Address 34 EDGEMERE DR

City

ALBERTSON

State

NY

Zip Code

11507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5042

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

GARY ALBERTSON

Mailing Address 28 ROBIN DRIVE

City

OAK RIDGE

State

NJ

Zip Code

07438

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UNITED WATER

Occupation

CORP VP

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		01		2014

Transaction ID : SA11AI.4770

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF KEVAN ABRAHAMS

Full Name (Last, First, Middle Initial)

GARY ALBERTSON

Mailing Address 28 ROBIN DRIVE

City

OAK RIDGE

State

NJ

Zip Code

07438

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UNITED WATER

Occupation

CORP VP

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2014

Transaction ID : SA11AI.5016

Amount of Each Receipt this Period

500.00

ACTBLUE

Full Name (Last, First, Middle Initial)

DWAYNE ANDREWS

Mailing Address 116-11 225TH STREET

City

CAMBRIA HEIGHTS

State

NY

Zip Code

11411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COZEN O'CONNOR PUBLIC STRATEGI

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2014

Transaction ID : SA11AI.4993

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JOY BENEDICT

Mailing Address 498DEER PARK RD

City

DIX HILLS

State

NY

Zip Code

11746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2014

Transaction ID : SA11AI.5048

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF KEVAN ABRAHAMS**

Full Name (Last, First, Middle Initial)

**LEONARD BENEDICT****A.**

Mailing Address 498 DEER PARK RD

City

DIX HILLS

State

NY

Zip Code

11746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		28		2014

**Transaction ID : SA11AI.4821**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**ANDREA BERNSTEIN****B.**

Mailing Address 1010 NORTHERN BLVD

City

GREAT NECK

State

NY

Zip Code

11021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		06		2014

**Transaction ID : SA11AI.4833**

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**DAVID BERNSTEIN****C.**

Mailing Address 321 BALTUSTROL CIRCLE

City

ROSLYN

State

NY

Zip Code

11576

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		02		2014

**Transaction ID : SA11AI.4942**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF KEVAN ABRAHAMS

Full Name (Last, First, Middle Initial)

ZEBULON BLACKMAN

A.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2014

Transaction ID : SA11AI.4946

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JEROME BLUE

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : SA11AI.4990

Amount of Each Receipt this Period

500.00

MONEY ORDER

Full Name (Last, First, Middle Initial)

WILBUR BRESLIN

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2014

Transaction ID : SA11AI.4888

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF KEVAN ABRAHAMS

Full Name (Last, First, Middle Initial)

ED CAMPBELL

Mailing Address 85 WILLIS AVE

City

MINEOLA

State

NY

Zip Code

11501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NASSAU COUNTY

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		02		2014

Transaction ID : SA11AI.5019

Amount of Each Receipt this Period

250.00

ACTBLUE

Full Name (Last, First, Middle Initial)

DAVIS &amp; GUGERTY

Mailing Address 118-35 QUEENS BLVD.

City

FOREST HILLS

State

NY

Zip Code

11375

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		28		2014

Transaction ID : SA11AI.4917

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

GEORGE FAKIRIS

Mailing Address 33 POWERJHOUSE RD

City

ROSLYN HEIGHTS

State

NY

Zip Code

11577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5104

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

2050.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF KEVAN ABRAHAMS

Full Name (Last, First, Middle Initial)

KAREN FERRARE

A.

Mailing Address 162 POST AVE

City

WESTBURY

State

NY

Zip Code

11590

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5069

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MARTY GLENNON

B.

Mailing Address 2 BROWN ROAD

City

GREAT NECK

State

NY

Zip Code

11024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5012

Amount of Each Receipt this Period

250.00

ACTBLUE

Full Name (Last, First, Middle Initial)

MARGARITA GRASING

C.

Mailing Address 551 WATEREDGE AVE

City

BALDWIN

State

NY

Zip Code

11510

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5046

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF KEVAN ABRAHAMS

Full Name (Last, First, Middle Initial)

LAUREEN HARRIS

A.

Mailing Address 25 WEST DRIVE

City

PLANDOME

State

NY

Zip Code

11030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CCH &amp; O

Occupation

TAX LAWYER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

Transaction ID : SA11AI.4950

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

CHAIM ISHAKIS

B.

Mailing Address PO BOX 592

City

YONKERS

State

NY

Zip Code

10705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		02		2014

Transaction ID : SA11AI.5021

Amount of Each Receipt this Period

360.00

ACTBLUE

Full Name (Last, First, Middle Initial)

JUDITH JACOBS

C.

Mailing Address 30 COLGATE LANE

City

WOODBURY

State

NY

Zip Code

11797

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5097

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1110.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF KEVAN ABRAHAMS

Full Name (Last, First, Middle Initial)

BARBARA JONES

A.

Mailing Address 1020 KNABBE COURT

City

UNIONDALE

State

NY

Zip Code

11553

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2014

Transaction ID : SA11AI.4955

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

MARK JOSEPH

B.

Mailing Address 7120 FAIRFAX RD

City

BETHESDA

State

MD

Zip Code

20814

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2014

Transaction ID : SA11AI.4944

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JERRY KORNBLUTH

C.

Mailing Address 16 FONDA RD

City

ROCKVILLE CENTRE

State

NY

Zip Code

11570

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2014

Transaction ID : SA11AI.4956

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2300.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF KEVAN ABRAHAMS

Full Name (Last, First, Middle Initial)

JERRY KORNBLUTH

Mailing Address 16 FONDA RD

City

ROCKVILLE CENTRE

State

NY

Zip Code

11570

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5099

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

CINDY KOURIL

Mailing Address 2 SAXON COURT

City

GLEN COVE

State

NY

Zip Code

11542

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5080

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

RAVI LAM

Mailing Address 5 CHRISTOPHER CT

City

MELVILLE

State

NY

Zip Code

11747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5100

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

2250.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF KEVAN ABRAHAMS

Full Name (Last, First, Middle Initial)

DONALD LEISTMAN

Mailing Address 155 FIRST STREET

City

MINEOLA

State

NY

Zip Code

11501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KOEPPPEL MARTON &amp; LESITMAN, LLP

Occupation

LAWYER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		27		2014

Transaction ID : SA11AI.4924

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

CRISTOBAL LOPEZ

Mailing Address 15 MERRIAM CT

City

ROCKVILLE CENTRE

State

NY

Zip Code

11570

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2014

Transaction ID : SA11AI.4861

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

CHRISTIAN LOSEE

Mailing Address 320 TYLER AVE

City

MILLER PLACE

State

NY

Zip Code

11764

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		02		2014

Transaction ID : SA11AI.5055

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 31  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF KEVAN ABRAHAMS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>EILEEN LOSEE</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2014	
Mailing Address 10 STUART DR		<b>Transaction ID : SA11AI.5053</b>	
City CORAM	State NY	Zip Code 11727	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>CHUCK MADU</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 75 SOUTH MAIN STREET		<b>Transaction ID : SA11AI.4935</b>	
City FREEPORT	State NY	Zip Code 11520	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>PAUL MARCONI</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 28 / 2014	
Mailing Address		<b>Transaction ID : SA11AI.4900</b>	
City	State	Zip Code	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		1000.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 31  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF KEVAN ABRAHAMS**

Full Name (Last, First, Middle Initial) <b>ANILA MIDHA</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 25 / 2014
Mailing Address 43 ERICK AVE		Transaction ID : SA11AI.4931
City HEWLETT	State NY	
Zip Code 11557		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>GERARD MISK</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 215-48 JAMAICA AVE		Transaction ID : SA11AI.5009
City QUEENS VILLAGE	State NY	
Zip Code 11428		Amount of Each Receipt this Period 500.00 ACTBLUE
FEC ID number of contributing federal political committee. C		
Name of Employer SELF EMPLOYED	Occupation ATTORNEY	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>MOHAMMED MOIZUDDIN</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 8 JAYMIE DRIVE		Transaction ID : SA11AI.5040
City WESTBURY	State NY	
Zip Code 11590		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 31  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF KEVAN ABRAHAMS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>CHRIS MURRAY</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 15 MILLBROOK DRIVE		<b>Transaction ID : SA11AI.4970</b>	
City STONY BROOK	State NY	Zip Code 11790	Amount of Each Receipt this Period ACTBLUE 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer RUSKIN MOSCOU FALTISHEK	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>CHRIS MURRAY</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2014	
Mailing Address 15 MILLBROOK DRIVE		<b>Transaction ID : SA11AI.5011</b>	
City STONY BROOK	State NY	Zip Code 11790	Amount of Each Receipt this Period ACTBLUE 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer RUSKIN MOSCOU FALTISHEK	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>THOMAS MURRAY</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 17 / 2014	
Mailing Address 78 BENSON AVE		<b>Transaction ID : SA11AI.4807</b>	
City SAYVILLE	State NY	Zip Code 11782	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		750.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF KEVAN ABRAHAMS

Full Name (Last, First, Middle Initial)

SEKHAR NELANUTHALA

Mailing Address 62bCRESCENT BEACH ROAD

City

GLEN COVE

State

NY

Zip Code

11542

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

Transaction ID : SA11AI.4992

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

PAOLA ORSINI

Mailing Address 63 WELLINGTON RD

City

GARDEN CITY

State

NY

Zip Code

11530

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5102

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

DEIRDRE PAOLINO

Mailing Address 4 RIDGE RD

City

CORAM

State

NY

Zip Code

11727

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		02		2014

Transaction ID : SA11AI.5051

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF KEVAN ABRAHAMS

Full Name (Last, First, Middle Initial)

FRED PERRY

Mailing Address 175 DEER PARK RD

City

DIX HILLS

State

NY

Zip Code

11746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5095

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

PERRY PETTUS

Mailing Address 10 JERUSALEM AVENUE

City

HEMPSTEAD

State

NY

Zip Code

11550

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		28		2014

Transaction ID : SA11AI.4910

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

CARMEN PINEYRO

Mailing Address 25 PENNSYLVANIA AVE

City

FREEPORT

State

NY

Zip Code

11520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		28		2014

Transaction ID : SA11AI.4893

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1700.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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 FOR LINE NUMBER: PAGE 20 OF 31  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
           12       13a       13b       14       15

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 NAME OF COMMITTEE (In Full)  
**FRIENDS OF KEVAN ABRAHAMS**

Full Name (Last, First, Middle Initial) <b>MCHAEAL POSILLICO</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 / 02 / 2014</b>
Mailing Address <b>1750 NEW HIGHWAY</b>		<b>Transaction ID : SA11AI.4952</b>
City <b>FARMINGDALE</b>	State <b>NY</b>	Zip Code <b>11735</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>POSILLICO, INC.</b>	Occupation <b>BUSINESS OWNER</b>	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>LOUIS PREZEAU</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 / 03 / 2014</b>
Mailing Address		<b>Transaction ID : SA11AI.5036</b>
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>300.00</b>
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>300.00</b>	

Full Name (Last, First, Middle Initial) <b>STANLEY SANDERS</b>		Date of Receipt M M / D D / Y Y Y Y <b>05 / 22 / 2014</b>
Mailing Address <b>9 COPPERFIELD LN</b>		<b>Transaction ID : SA11AI.4843</b>
City <b>OLD WESTBURY</b>	State <b>NY</b>	Zip Code <b>11568</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600.00</b>
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF KEVAN ABRAHAMS**

Full Name (Last, First, Middle Initial)

**BENJAMIN SANDS****A.**

Mailing Address 23 FISHERMANS DRIVE

City

PORT WASHINGTON

State

NY

Zip Code

11050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		12		2014

**Transaction ID : SA11AI.4841**

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**SYDELLE SANDS****B.**

Mailing Address 23 FISHERMANS DRIVE

City

PORT WASHINGTON

State

NY

Zip Code

11050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		12		2014

**Transaction ID : SA11AI.4839**

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**MARTIN SCHACKER****C.**

Mailing Address 90 SOUTHDOWN RD

City

HUNTINGTON

State

NY

Zip Code

11743

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		30		2014

**Transaction ID : SA11AI.5007**

Amount of Each Receipt this Period

1000.00

ACTBLUE

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

6200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF KEVAN ABRAHAMS

Full Name (Last, First, Middle Initial)

PHILIP WACHTLER

A.

Mailing Address 1319 WOLVER HOLLOW RD

City

OYSTER BAY

State

NY

Zip Code

11771

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WKE

Occupation

REAL ESTATE

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

Transaction ID : SA11AI.4981

Amount of Each Receipt this Period

250.00

ACTBLUE

Full Name (Last, First, Middle Initial)

PHIL WESTERMAN

B.

Mailing Address 44 BAY DRIVE

City

MASSAPEQUA

State

NY

Zip Code

11758

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARTHUR J. GALLAGHER

Occupation

SALES

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : SA11AI.5022

Amount of Each Receipt this Period

100.00

ACTBLUE

Full Name (Last, First, Middle Initial)

BILL WISSER

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5049

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

36360.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 OF 31

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**FRIENDS OF KEVAN ABRAHAMS**

Full Name (Last, First, Middle Initial)

**JENKINS FOR WESTCHESTER**

Mailing Address 108 BUSHEY AVENUE

City

YONKERS

State

NY

Zip Code

10710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 21 / 2014

Transaction ID : SA11C.4929

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**PLUMBERS LOCAL UNION #200 PAC**

Mailing Address 2123 5TH AVENUE

City

RONKONKOMA

State

NY

Zip Code

11779

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 21 / 2014

Transaction ID : SA11C.4812

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1250.00

1250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 31

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input checked="" type="checkbox"/> 15
------------------------------------	-------------------------------------	-------------------------------------	------------------------------------	--

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NAME OF COMMITTEE (In Full)

**FRIENDS OF KEVAN ABRAHAMS**

Full Name (Last, First, Middle Initial)

**BARKET, MARION, EPSTEIN & KEARON, LLP**

Mailing Address 666 OLD COUNTRY ROAD

City

GARDEN CITY

State

NY

Zip Code

11530

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	21	/	2014

Transaction ID : SA15.4938

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**METAL LATHERS LOCAL 46**

Mailing Address 1322 3RD AVE

City

NEW YORK

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	21	/	2014

Transaction ID : SA15.4933

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4600.00

4600.00

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 OF 31

☒ 17    ☐ 18    ☐ 19a    ☐ 19b  
☐ 20a    ☐ 20b    ☐ 20c    ☐ 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF KEVAN ABRAHAMS**

Full Name (Last, First, Middle Initial)

## **A. ACTBLUE TECHNICAL SERVICES**

Mailing Address 366 SUMMER STREET

City State Zip Code  
 SOMERVILLE MA 02144

Purpose of Disbursement  
 SERVICE FEES

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
 04 / 01 / 2014

Amount of Each Disbursement this Period

286.04

Transaction ID : SB17.5029

## **B. ACTBLUE TECHNICAL SERVICES**

Mailing Address 366 SUMMER STREET

City State Zip Code  
 SOMERVILLE MA 02144

Purpose of Disbursement  
 SERVICE FEES

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
 04 / 06 / 2014

Amount of Each Disbursement this Period

233.90

Transaction ID : SB17.5030

## **C. ACTBLUE TECHNICAL SERVICES**

Mailing Address 366 SUMMER STREET

City State Zip Code  
 SOMERVILLE MA 02144

Purpose of Disbursement  
 SERVICE FEES

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
 04 / 13 / 2014

Amount of Each Disbursement this Period

365.79

Transaction ID : SB17.5031

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

885.79

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF KEVAN ABRAHAMS**

Full Name (Last, First, Middle Initial)

**A. ACTBLUE TECHNICAL SERVICES**

Mailing Address 366 SUMMER STREET

City	State	Zip Code
SOMERVILLE	MA	02144

Purpose of Disbursement  
SERVICE FEES

003

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 20 / 2014

Amount of Each Disbursement this Period

17.79
-------

Transaction ID : SB17.5035

**B. ACTBLUE TECHNICAL SERVICES**

Mailing Address 366 SUMMER STREET

City	State	Zip Code
SOMERVILLE	MA	02144

Purpose of Disbursement  
SERVICE FEES

003

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 27 / 2014

Amount of Each Disbursement this Period

5.35
------

Transaction ID : SB17.5034

**C. ACTBLUE TECHNICAL SERVICES**

Mailing Address 366 SUMMER STREET

City	State	Zip Code
SOMERVILLE	MA	02144

Purpose of Disbursement  
SERVICE FEES

003

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 04 / 2014

Amount of Each Disbursement this Period

18.58
-------

Transaction ID : SB17.5033

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

41.72

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF KEVAN ABRAHAMS**

Full Name (Last, First, Middle Initial)

**A. ACTBLUE TECHNICAL SERVICES**

Mailing Address 366 SUMMER STREET

City	State	Zip Code
SOMERVILLE	MA	02144

Purpose of Disbursement  
SERVICE FEES

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		26		2014

Amount of Each Disbursement this Period

28.06
-------

Transaction ID : SB17.5032

**B. ACTBLUE TECHNICAL SERVICES**

Mailing Address 366 SUMMER STREET

City	State	Zip Code
SOMERVILLE	MA	02144

Purpose of Disbursement  
SERVICE FEES

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2014

Amount of Each Disbursement this Period

59.25
-------

Transaction ID : SB17.5028

**C. ACTBLUE TECHNICAL SERVICES**

Mailing Address 366 SUMMER STREET

City	State	Zip Code
SOMERVILLE	MA	02144

Purpose of Disbursement  
SERVICE FEES

Category/ Type
-------------------

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

Amount of Each Disbursement this Period

91.48
-------

Transaction ID : SB17.5026

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

178.79

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF KEVAN ABRAHAMS**

Full Name (Last, First, Middle Initial)

**A. LEAH CARTER**

Mailing Address 867 MADISON PLACE

City	State	Zip Code
N MERRICK	NY	11566

Purpose of Disbursement  
COMPLIANCE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

850.00
--------

Transaction ID : SB17.4998

**B. LEAH CARTER**

Mailing Address 867 MADISON PLACE

City	State	Zip Code
N MERRICK	NY	11566

Purpose of Disbursement  
CONSULTANT

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

850.00
--------

Transaction ID : SB17.5004

**C. MILLENNIAL STRATEGIES**Mailing Address 2 WALL STREET  
STE 302

City	State	Zip Code
NEW YORK	NY	10006

Purpose of Disbursement  
CONSULTING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

28767.00
----------

Transaction ID : SB17.4994

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

30467.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF KEVAN ABRAHAMS**

Full Name (Last, First, Middle Initial)

**A. MILLENNIAL STRATEGIES**Mailing Address 2 WALL STREET  
STE 302

City NEW YORK State NY Zip Code 10006

Purpose of Disbursement  
CONSULTANTS

006

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

9478.00
---------

Transaction ID : SB17.5000

**B. SEARCHLIGHT DIRECT CONTACT**

Mailing Address 195 HICKS STREET

City BROOKLYN State NY Zip Code 11201

Purpose of Disbursement  
EXPENSE

005

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

20420.00
----------

Transaction ID : SB17.4996

**C. SEARCHLIGHT DIRECT CONTACT**

Mailing Address 195 HICKS STREET

City BROOKLYN State NY Zip Code 11201

Purpose of Disbursement  
EXPENSES

005

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

Amount of Each Disbursement this Period

25056.00
----------

Transaction ID : SB17.5001

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

54954.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF KEVAN ABRAHAMS**

Full Name (Last, First, Middle Initial)

**A. SEARCHLIGHT DIRECT CONTACT**

Mailing Address 195 HICKS STREET

City	State	Zip Code
BROOKLYN	NY	11201

Purpose of Disbursement  
EXPENSE

005

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2014

Amount of Each Disbursement this Period

2847.00

Transaction ID : SB17.5006

**B. VISION MEDIA**

Mailing Address 854 8TH STREET

City	State	Zip Code
SECAUCUS	NJ	07094

Purpose of Disbursement  
CONSULTANT

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		10		2014

Amount of Each Disbursement this Period

8500.00

Transaction ID : SB17.5002

**C.**

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**SUBTOTAL** of Disbursements This Page (optional).....

11347.00

**TOTAL** This Period (last page this line number only).....

97874.24

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 31

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF KEVAN ABRAHAMS**

Full Name (Last, First, Middle Initial)

**A. SEARCHLIGHT DIRECT CONTACT**

Mailing Address 195 HICKS STREET

City	State	Zip Code
BROOKLYN	NY	11201

Purpose of Disbursement  
EXPENSE

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		26		2014

Amount of Each Disbursement this Period

12038.00

Transaction ID : SB21.5005

**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

12038.00

12038.00